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Approved for use through 10/31/2002. OMB 0651-0032

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| | | | |
|---|--|------------------------|---------------|
| DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) | | Attorney Docket Number | 718175.2 |
| | | First Named Inventor | Sosna, Linda |
| COMPLETE IF KNOWN | | | |
| | | Application Number | Not yet known |
| | | Filing Date | Herewith |
| | | Group Art Unit | Not yet known |
| | | Examiner Name | Not yet known |

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SECURITY ALARM SYSTEM FOR PERSONAL BAGGAGE

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YY)

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as United States Application Number or PCT International
(if applicable).

Application Number

and was amended on (MM/DD/YY)

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I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not claimed | Certified Copy Attached? YES | Certified Copy Attached? NO |
|-------------------------------------|---------|----------------------------------|--------------------------|------------------------------|-----------------------------|
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |
|-----------------------|--------------------------|--|
| 60/319,608 | 10/11/2002 | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
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Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SENT TO: Assistant Commissioner for Patents, Box Design, Washington, DC 20231.

PTO/SB/18 (08-00)

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number
or Bar Code Label 27128 OR Correspondence address below

Name Samuel DigirolamoAddress Blackwell Sanders Peper Martin LLPAddress 720 Olive Street, Suite 2400City St. LouisState MissouriZIP 63101Country USTelephone 314-345-6000Fax 314-345-6060

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that those statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

 A petition has been filed for this unsigned inventor**NAME OF SOLE OR FIRST INVENTOR:**Given Name
(first and middle [if any]) LindaFamily Name
Or Surname SonsaInventor's
Signature Rimma SonsaDate 10/08/03Residence City: St. LouisState MOCountry USCitizenship USMailing Address 330 Royal Valley Drive

Mailing Address

City St. LouisState MOZIP 63141Country US A petition has been filed for this unsigned inventor**NAME OF SECOND INVENTOR:**Given Name
(first and middle [if any])Family Name
Or SurnameInventor's
Signature

Date

Residence City:

State

Country

Citizenship

Mailing Address

Mailing Address

City

State

ZIP

Country

 Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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